



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
 United States Patent and Trademark Office  
 Address: COMMISSIONER FOR PATENTS  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
 www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 3284

|                                    |   |                     |                               |  |
|------------------------------------|---|---------------------|-------------------------------|--|
| <b>SERIAL NUMBER</b><br>09/400,296 | <b>FILING OR 371(c) DATE</b><br>09/21/1999<br><b>RULE</b> | <b>CLASS</b><br>380 | <b>GROUP ART UNIT</b><br>2135 | <b>ATTORNEY DOCKET NO.</b><br>026880.00018 |
|------------------------------------|---|---------------------|-------------------------------|--|

## APPLICANTS

JOHN S. HENDRICKS, POTOMAC, MD;  
 MICHAEL L. ASMUSSEN, HERNDON, VA;  
 JOHN S. MCCOSKEY, CASTLE ROCK, CO;

## \*\* CONTINUING DATA \*\*\*\*\*

This application is a CIP of 07/991,074 12/09/1992 and is a CIP of 08/336,247 11/07/1994 PAT 5,986,690  
 and is a CIP of 08/160,194 12/02/1993 PAT 5,990,927  
 and is a CIP of 08/906,469 08/05/1997 PAT 6,408,437  
 and is a CIP of 09/191,520 11/13/1998

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 01/07/2000

|   |                               |                             |                            |                                |
|---|-------------------------------|-----------------------------|----------------------------|--------------------------------|
| Foreign Priority claimed<br><input type="checkbox"/> yes <input checked="" type="checkbox"/> no   | <b>STATE OR COUNTRY</b><br>MD | <b>SHEETS DRAWING</b><br>55 | <b>TOTAL CLAIMS</b><br>189 | <b>INDEPENDENT CLAIMS</b><br>4 |
| 35 USC 119 (a-d) conditions met<br><input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance |                               |                             |                            |                                |
| Verified and Acknowledged<br>Examiner's Signature <i>[Signature]</i> Initials   |                               |                             |                            |                                |

## ADDRESS

4372

## TITLE

ELECTRONIC BOOK SECURITY AND COPYRIGHT PROTECTION SYSTEM

|                                    |   |   |
|------------------------------------|---|---|
| <b>FILING FEE RECEIVED</b><br>4010 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |
|------------------------------------|---|---|